#### DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

## **Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN

Bureau of Quality Assurance
P.O. Box 2969

Madison WI 53701-2969

#### **Facility Information**

Facility Name: LUTHERAN HOME ASSISTED LIVING (0010582)

Address: 7500 W NORTH AVE, WAUWATOSA, WI 53213

License Status: REGULAR

Licensed/Certified/Registered 12/01/2004

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey	History

Survey ID: 0094993 End Date: 06/03/2005 Type: OTHER Purpose: VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0094598 End Date: 03/29/2005 Type: OTHER Purpose: DESK REVIEW

**Results:** ENFORCEMENT ACTION

Statement of Deficiency: #10009102 Served 04/22/2005

<u>Compliance</u>

Deficiencies CitedSubject AreaVerifiedCorrected50.065(6)(b)CREDENTIALED CAREGIVERS06/03/2005Yes

Survey ID: 0093637 End Date: 11/11/2004 Type: STANDARD Purpose: SURVEY/SELF REPORT

**Results:** LICENSE/CERT/REGISTRATION ISSUED

Survey ID: 0092655 End Date: 06/01/2004 Type: INITIAL Purpose: SURVEY

**Results:** PROBATIONARY LICENSE ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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### **Enforcement History**

Date: 04/21/2005

SOD #10009102

Appealed: No

**Sanctions** 

COMPLY WITH REQUIREMENT

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